PTC/SB/06 (08-03)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
to a collection of information unless it displays a valid OMB could a sub-

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application ex Oorles Number		
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY									OR	OTHER THAN SMALL ENTITY	
	FOR	NUMB	NUMBER FILED		NUMBER EXTRA		RATE	FEE		RATE	FEE
	SIC FEE CFR 1.16(a))					1					5
TO	TAL CLAIMS CFR 1.16(c))		minus 20 =			H		-	OR		
INC	EPENDENT CLA	MS	munus 20 0		\leq	L	× *		OR	X 8=	
(37 CFR 1.18(b)) minus 3 4					 	**		OR	X \$=		
MULTIPLE DEPENDENT CLAUMPRESENT (37 CFR 1.16(d))						+3=		-OR	+5=		
" If the selection in column 1 is less than zero, enter "0" in column 2.				2		TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II											
<u>/</u>	-8-0	(Column 1)		(Column 2)	(Column 3)		SMALL E	NTITY	OR		R THAN ENTITY
NT A		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
AMENDMENT	Total (37 CFR 1.15(c))	. 8	Minus	20	* ()		x \$=	, ,	OR	xs. X	FEE
M	Independent (37 CFR 1,18(b))	. 3	Minus	7	()		x s_ =		OR	X S	
¥	FIRST PRESENT	TATION OF MULTIPL	E DEPEND	ENT CLAIM (37 CF	R 1,16(d))		+1 =		OR	/ <u>.</u>	$\overline{}$
1/ 2/ 0							TOTAL ADD'L FEE		05	TOTAL ADD'L FEE	
7	126.01	(Calumn 1)		(Column 2)	(Column 3)				l		_ ~
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE /		RATE	ADDI- TIONAL
ENDMENT	Total (37 CFR 1.18(c))	. 8	Minus	" 20	=		X 3=	122/	OR	X \$=	FEE /
EN	Independent (37 CFR 1.15(b))	· 2	Minus	··· 3			X \$ =	/	OR OR	x s	_/_
AM	FIRST PRESENT	ATION OF MULTIPLE	E DEPENDI	ENT CLAIM (37 CF	R 1.16(d))		+5		OR	+8=	/
							TOTAL ADO'L FEE	1	OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)								/			
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDME	Total* (37 OFR 1,16(c))	•	Minus	••	•		x s_ =		OR	X \$=	146
ш	Independent (37 CFR 1.15(bil)	•	Minus	•••	#	l	x s =		OR .	X 3=	
AM	FIRST PRESENT	ATION OF MULTIPLE	DEPENDE	ENT CLAIM (37 CF)	R 1.16(d))	İ	+1 =		OR OR	+ 5 =	
							TOTAL ADD'L FEE		OR I	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Fighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Fighest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Fighest Number Previously Paid For" (Total or Independent) is the than 3, enter "3".											

Interregnest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.